

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | A. BOONE |        | 07-28-01 |
| O.I.P.E. CLASSIFIER       |          | 48     | 8/6/01   |
| FORMALITY REVIEW          | JFB      | JL-916 | 09-14-01 |
| RESPONSE FORMALITY REVIEW | HIL      | 1079   | 01/14/02 |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim          | Date |
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| Claim          | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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886  
09/01  
6/17  
1-15-02